

# Welcome to Our Provider Directory

Thank you for your interest in the New England Health plans (NEHP), a collaborative effort of six Blue Cross Blue Shield plans serving the people of New England.

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This directory includes hospitals, physicians, and other health care professionals participating with the plan at the time of publication. You should verify a provider's participation status when scheduling an appointment because the listings in this directory are frequently updated.

For the most up-to-date listings of participating providers, visit our website at [www.bluecrossma.com/findadoctor](http://www.bluecrossma.com/findadoctor) or call our Physician Selection Service at **1-800-821-1388**.

For more information on coverage or the network serving your plan, please call Member Service at the number on the front of your member ID card.

## We Make Finding the Right Doctor Easy

Finding a doctor in our directory is easy. Just decide how you want to find your doctor—by name, town, specialty, etc.—then follow the steps below.

**By name?** If you already have a doctor or know the name of one you would like to choose, use the Index, which starts on page 913.

**By town?** If you know the city where you would like your PCP's office to be located, just turn to the Primary Care Providers (PCPs) section, which starts on page 3.

**By hospital affiliation?** Is it important to you to have a PCP who works with a particular hospital? Turn to our PCP Index by Hospital Affiliation, which starts on page 193. You'll find the names of our PCPs listed under the hospitals to which they usually admit patients.

**By languages spoken?** If your primary language isn't English, you can find a PCP who speaks your language. Just turn to the PCP Index by Languages Spoken section, which begins on page 215.

**By specialty?** Want to know which allergists, orthopedists, and other specialists are in our network? Turn to the Specialists section, which begins on page 257.

Remember, if you need specialty care, talk it over with your PCP, who will refer you to a specialist who is right for you.

**By phone?** Are you looking for a doctor in Peabody with weekend hours? Or a pediatrician in the Pittsfield area? For answers to questions like these, just call our Physician Selection Service at 1-800-821-1388, Monday through Friday, 8:00 a.m. to 6:00 p.m. ET. Our representatives will be happy to give you more detailed information about any of our providers and help you find a doctor who meets your needs.

**By Internet?** Log on to [www.bluecrossma.com/findadoctor](http://www.bluecrossma.com/findadoctor) anytime you're on the web to browse our online provider directory, which is updated weekly. Then visit [www.bluecrossma.com/membercentral](http://www.bluecrossma.com/membercentral) and create an account or log in to select a new PCP.

## Your Provider Directory

This directory includes hospitals, doctors, and other health care professionals participating with the plan at the time of publication. You should verify a provider's participation status when scheduling an appointment because the listings in this directory are frequently updated. Directories are also available for networks in Connecticut, Maine, New Hampshire, Rhode Island, and Vermont.

For more information on coverage or the network, or to obtain copies of other state directories, please call Member Service at the phone number listed on the front of your ID card.

Remember—close to home, close to work, or close to school—we have doctors all over New England.

### What Is a Primary Care Provider (PCP)?

When you join this plan, you will be asked to select a PCP. A PCP can be a physician or nurse practitioner with a specialty of family medicine, internal medicine, or pediatrics. PCPs are listed in this directory in the Primary Care Providers section. Each member of your family may choose his or her own PCP from the network. Except in the case of an emergency, your PCP is usually the first person you call when you need medical care. He or she will be your primary health care provider, will be familiar with your medical history, and will help guide your overall medical care.

Together, your providers can make sure that all treatments and medications you receive support your overall health goals. They can also better respond to any possible medical crisis.

### How Do You Choose Your PCP?

Choosing the right PCP is an important decision. Your choice will determine who you will see for most of your health care and where you will receive it. This is because PCPs will most often send their patients to specialists who are affiliated with the PCP's hospital or medical group. Your choice is also important because it will impact the costs that you pay for some health care services. You may want to ask people you trust—family, friends, and coworkers—for recommendations. Then, as you finalize your selection, consider a participating PCP who is conveniently located near your work or home. And most importantly, talk to the PCP and office staff to be sure that this particular practice can meet your personal health care needs.

**Please see page vi for important information about PCPs and your plan.**

### How Do You Change Your PCP?

You may change your PCP at any time. Simply call Member Service at the number on the front of your ID card or go to [www.bluecrossma.com/membercentral](http://www.bluecrossma.com/membercentral) to record your PCP selection.

### When You Need Specialty Care

Because your PCP is most familiar with your medical history and health care needs, he or she can guide your choice of specialists and effectively manage your care. Anytime you need specialty care, your PCP can usually refer you to participating providers with whom he or she is affiliated, making it possible for your PCP to have easy access to your X-rays, lab results, and charts. Before you seek specialty care, be sure to contact your PCP's health care team so they can ensure that any necessary referrals are in place.

## Doing Our Part

We pay our providers in one of three ways. Some providers are paid on a fee-for-service basis, meaning they are paid each time you receive care. The amount we pay for fee-for-service is called an “allowable amount.” Some providers choose to receive a fixed payment per patient over a given period. This arrangement is called “capitation” or “budgeted capitation.”

Providers who have contracted with us under the Alternative Quality Contract (AQC) are agreeing to be reimbursed through a budgeted capitated methodology, but are also rewarded on how well they take care of their patients, rather than for how many tests, visits, and procedures they perform. We call this payment method “budgeted with quality incentives.”

The AQC is a contract model that uses a global payment budget for the cost of medical care, combined with quality-based incentives. It is a significant change from traditional fee-for-service contracts, which reward providers for the volume and complexity of services, and instead rewards providers for the quality, safety and effectiveness of care. It is designed to improve quality of care and a positive patient experience, while significantly reducing annual medical cost trends. The arrangement gives providers the flexibility to provide patient care in ways the providers feel are best.

For providers that have this type of contract, the AQC offers incentives that reward PCPs for quality of care, such as making sure that patients are getting the tests and services needed to maintain good health, and to carefully treat chronic illnesses. Providers are accountable for the quality of care for each patient, for the efficiency of care for the whole group, and for the positive experiences of the patients cared for by the group.

By restructuring the system to appropriately align financial and clinical incentives in ways that improve the quality of care, the AQC will ultimately curb the cost of care and will help the industry move away from the unnecessary expense in the health care system that is associated with the fee-for-service model.

## Service Area

The geographic service areas are: Connecticut, Maine, Massachusetts, New Hampshire, Rhode Island, Vermont.

## Emergency Medical Services

At the onset of an emergency medical condition that in your judgment requires emergency medical care, you should go to the nearest emergency room. For assistance, call your local emergency medical service system by dialing **911**, the emergency telephone access number, or your local emergency telephone number.

You usually need emergency medical services because of the sudden onset of a condition manifesting itself by symptoms of sufficient severity, including severe pain, which are severe enough that the lack of prompt medical attention could reasonably be expected by a prudent layperson who possesses an average knowledge of health and medicine to result in placing your life or health or the health of another (including an unborn child) in serious jeopardy or serious impairment of bodily functions or serious dysfunction of any bodily organ or part, or as determined by a provider with knowledge of your condition, result in severe pain that cannot be managed without such care. Some examples of conditions that require emergency medical care are suspected heart attacks, strokes, poisoning, loss of consciousness, convulsions, and suicide attempts.

## Blue Distinction Centers®

Blue Distinction is a national designation awarded by Blue Cross and Blue Shield to hospitals and medical facilities that have demonstrated expertise in delivering quality health care in the areas of bariatric surgery, cardiac care, complex and rare cancers, knee and hip replacement, spine surgery, and transplants. To find a Blue Distinction Center near you, visit [www.bcbs.com/innovations/bluedistinction](http://www.bcbs.com/innovations/bluedistinction) or call the number on the front of your ID card.

# Important Information About HMO Blue New England Options Providers

The HMO Blue New England Options network ranks hospitals and groups of PCPs into three benefits tiers based on cost and nationally accepted quality performance criteria selected by Blue Cross Blue Shield of Massachusetts. Where you choose to receive care will determine your out-of-pocket costs for most services under the plan.

- **Enhanced Benefits Tier**—Includes Massachusetts PCPs and hospitals that meet our quality benchmark and our benchmark for lowest cost.
- **Standard Benefits Tier**—Includes Massachusetts PCPs and hospitals that meet our quality benchmark and our benchmark for moderate cost. It also includes providers without sufficient data for measurement on one or both benchmarks. In limited circumstances, the Standard Benefits Tier includes certain providers whose scores would put them in the Basic Benefits Tier to provide geographic access for members.
- **Basic Benefits Tier**—Includes Massachusetts PCPs and hospitals that scored below our quality benchmark and/or our benchmark for moderate cost.

**Note:** PCPs were measured based on their HMO patients as part of their provider group. Hospitals were measured based on individual facility performance. Provider groups can be composed of an individual provider or a number of providers who practice together. Tier placement is based on cost and quality benchmarks where measurable data is available. Providers without sufficient data for either cost or quality are placed in the Standard Benefits Tier. Providers who do not meet benchmarks for one or both of the domains and hospitals that use nonstandard reimbursement are placed in the Basic Benefits Tier.

## Using a Blue Options Plan

**Where you receive care will determine your out-of-pocket costs for most services under the HMO Blue New England Options plan.** By choosing Enhanced Benefits Tier providers each time you receive hospital or PCP care, you can generally incur the lowest out-of-pocket costs.

This is why it's important to consider the tier of both your PCP and the facility where your PCP has admitting privileges before you choose a PCP or receive care. For example, if you require hospital care and your Enhanced Benefits Tier PCP refers you to an Enhanced Benefits Tier hospital, you would pay the lowest cost-sharing amount for both your PCP and hospital services.

Or, if your Enhanced Benefits Tier PCP refers you to a Basic Benefits Tier hospital for care, you will pay the lowest copayments for PCP services, but the highest copayments for hospital services, except in an emergency. Consult the PCP Index by Hospital Affiliation section in this directory for a complete list of tiered hospitals and their associated tiered PCPs. Providers in this directory with no tier designation were not tiered, but are part of the HMO Blue New England Options provider network.

# Behavioral Health Information

## About the Behavioral Health Network

This directory includes the Blue Cross Blue Shield network of behavioral health providers, starting on page 701. The network includes behavioral health facilities and professionals that have met credentialing standards. If you do not have coverage for behavioral health services through Blue Cross Blue Shield, this section of the directory does not apply to you. For more information about your behavioral health coverage and the network you should use to access these services, check your benefit literature or contact your employer.

## How to Receive Care

If you need behavioral health services or substance abuse treatment, it is important that you, or someone on your behalf, call the mental health and substance abuse telephone number on your ID card to confirm your provider's network participation and your benefits, and to receive information about authorization requirements. Please see the Emergency Medical Care section below for what to do in an emergency medical situation.

## Emergency Medical Care

At the onset of an emergency medical or behavioral health condition that requires emergency medical care, you should go to the nearest emergency room. For assistance, call 911 or the local emergency telephone number.

## For More Information

For more information on coverage or the provider network serving your benefit plan, call Member Service at the phone number on the front of your ID card.

# Sample Provider Listing

	<b>Boston</b>	← Provider's location
Provider's name, address, and telephone number →	<b>Brown, John J., MD</b> Enhanced Benefits Tier <b>C</b> <b>Q</b>	← Provider's tier and cost and quality designations. See the legend below.
	<b>2 Main Street</b> <b>(617) 555-0000</b>	
Network hospital where the provider has admitting privileges →	<b>General Hospital</b>	
	<b>Pediatrics</b>	← Provider's specialty
	Languages: Spanish	← Alternate language(s) spoken
	PCP ID # 700A00000	← Provider's identifying number (You'll need to list the number on the Enrollment and Change Form.)

Listed below the provider's name is the provider's overall benefits tier and symbols that indicate how the provider performed relative to our cost and quality benchmarks. See page vi for more information.

## Primary Care Provider Group/Hospital Cost and Quality Designations

### COST

- C** Met benchmark for lowest cost
- C** Met moderate cost benchmark
- C** Did not meet moderate cost benchmark
- C** Insufficient information on cost (provider not measured)

### QUALITY

- Q** Met quality benchmark
- Q** Did not meet quality benchmark
- Q** Insufficient information on quality (provider not measured)